



Kern County Superior Court
AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

Volunteering as a docent at Kern County Superior Court, and understanding that Kern County Superior Court desires to be informed as to my previous record and character, and only for that purpose, I hereby authorize any authorized representative of the Kern County Sheriff's Department, bearing this release or a copy of it, within one year of its date, to obtain any information in your files and/or copies of all records pertaining to my criminal justice records/reports and probation/parole reports and records.

I hereby direct you to release this information upon request of the bearer. This release is executed with full knowledge and understanding that the information is only and exclusively for the official use of Kern County Superior Court.

Consent is granted for the Kern County Sheriff's Department to furnish the information described above to third parties in the course of fulfilling its official responsibilities.

I hereby release, hold harmless and indemnify you, as the custodian of any of such records, from any and all liability for damage, suits, actions or claims of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any questions as to the validity of this release, you may contact me as indicated below.

A photocopy of this release form shall be as valid as the original even though the photocopy does not contain an original writing of my signature. I understand that I have the right to receive a copy of this authorization and acknowledge that I have received a copy of it.

APPLICANT'S SIGNATURE **DATE**

SIGNATURE WITNESSED BY **DATE**

APPLICANT'S FULL NAME (please print)

() _____
TELEPHONE No.

APPLICANT'S CURRENT ADDRESS (include city, state, & zip code)
(8/21/02)